PTO/SB/22 (08-03)

Under the Paperwork Reduction Act of	995 no persons are rec	U.S. Patent a	and Trademark Office	r use through 7/31/2006. OMB 0 ce; U.S. DEPARTMENT OF CO nless if displays a valid OMB contr	MMERCE
DETITION FOR EXTENSION OF TIME UN				Docket No. (Optional) 2297520014.00	
	In re Applicati	on of <b>Stephen</b>	Kent et al.		
	Application N	umber	Filed	Ju	" 2 3 2l
		09/831,307		January 7, 2002	
	I FOr	OX VECTOR CODI	NG AN HIV AN	IGIGEN AND A	100
	Art Unit	1648	Examiner	Jeffrey S. Parkin	
This is a request under the provisior dentified application.	s of 37 CFR 1.13	36(a) to extend the p	eriod for filing a	a reply in the above	
he requested extension and appro	oriate non-small-e	entity fee are as follo	ws (check time	e period desired):	
One month (37 CFR 1.1	7(a)(1))		(	\$	
Two months (37 CFR 1.17(a)(2))				B	
Three months (37 CFR			_	950.00	
Four months (37 CFR 1				\$	
Five months (37 CFR 1	.17(a)(5))		-	<b>B</b>	
x Applicant claims small entity	status. See 37 C	FR 1,27. Therefore	the fee amou	nt shown above is	
reduced by one-half, and the			•		
A check in the amount of the	fee is enclosed.				
Payment by credit card. For	m PTO-2038 is at	ttached.			
The Director has already bee	n authorized to c	harge fees in this ap	pplication to a D	Deposit Account.	
The Director is hereby author			e required, or o	credit any	
overpayment, to Deposit Acc	_	03-1952	·	7) is attached to this	
I have enclosed a duplicate of submission in duplicate.	<del>opy of this snee</del> t	. Fee Fransmittal to	m (P10/88/17	r) is attached to this	
I am the applicant/invento	nr				
assignee of reco	rd of the entire in	terest. See 37 CFR 3(b) is enclosed. (Fo	3.71. orm PTO/SB/96	3).	
attorney or agen	t of record. Regi	stration Number _	***		
x attorney or agen	t under 37 CFR 1	.34(a).			
<del></del>	nber if acting under		45,640	$\Rightarrow$	
June 16, 2004		<	/_/	-	
Date			Signa	iture	
(703) 760-7769			Jonathan I	Bockman	
Telephone Number		<del></del>	Typed or printed name		
NOTE: Signatures of all the inventors or ass than one signature is required, see below	gnees of record of the e	entire interest or their repres	entative(s) are requi	red. Submit multiple forms if more	
Total of 1	forms are sub-	ittod			
Total of1	forms are subm	iilled.			

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